

Application Checklist

() Project Abstract

() Detailed project description for which funding is being requested

() Time-specific work plan(s) delineating activities needed to achieve objectives for special delivery

() Evaluation plans for delivered services.

() Description of Organization, Experience and Qualifications of applicant.

- information about previously performed grants/contracts
- qualifications of management and key projects staff
- copies of applicable licenses, certifications or accreditation (staff and facility)
- applicant business information (organizational and legal structure and financial status including audited financial statements).

() Staff and Subcontractor Information

- identification of key management and direct service personnel
- information on any proposed subcontractors
- job descriptions for key personnel

() Proposed Budget

- Itemized budget of all expenses and budget narrative justification
- A one page summary chart providing the following
 - ❖ A listing of all services to be provided
 - ❖ Total personnel requested
 - ❖ Estimated number of persons to be served
 - ❖ Total budget request

() Certifications and affidavits

- Completion of Attachments in Appendix A
- Certification of Drug-Free Workplace
- Other applicable Certifications and Affidavits identified as Attachments

Signature of Applicant

Representative: _____

Date: _____

Title: _____

Telephone Number: _____

REQUEST FOR APPLICATIONS

FROM

District of Columbia Department of Health

Primary Care, Planning and Prevention

Preventive Health Services Administration

Grant Program Title:

Preventive Health and Health Services
Block Grant for FY 2001

Announcement Date: **November 1, 2000**

RFA Release Date: **November 1, 2000**
5:30 p.m.

APPLICATION SUBMISSION DEADLINE: **December 15, 2000 4:45 PM**
Late applications will not be
accepted.

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SECTION A: GENERAL

A.1 Synopsis of Grant Program

The District of Columbia faces many health challenges. Morbidity and mortality rates for most diseases, lung and breast cancer, cardiovascular diseases, AIDS, diabetes and infant mortality is above national averages. The Preventive Health and Health Services Block Grant (PHHS) funds assist the Department of Health in the support of programs that address these health challenges. Services are directed toward controlling the spread of disease, reducing the incidence of preventable deaths and disabilities, and improving the quality of life for all residents.

The administrative agency for the grant is the Preventive Health Services Administration (PHSA), District of Columbia Department of Health (DOH). PHSA, in conjunction with the Block Grant Advisory Committee, will identify health priority areas for support in FY 2001. The selection will be based on several factors including testimony at the November 1, 2000 Public Hearing, District of Columbia mortality and morbidity data, Healthy People 2000 and the District of Columbia Residents Year 2000 Plan. The following health priority areas are currently identified:

<p>Chronic Disease Prevention Communicable Disease Control Poison Prevention in Children Prevention of Injury-Related Disability Sexual Assault and Violence Prevention Sexually Transmitted Disease Control Tuberculosis Control and Prevention Health Planning and Primary Care Cancer Prevention Diabetes Mellitus Mental Health Rape Education and Prevention Oral Health</p>
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The administrative agency for the sub-grant(s) is the Preventive Health Services Administration, District of Columbia Department of Health. The sub-grants selected for funding will become a part of the Preventive Health and Health Services Block Grant application for FY 2001. All funds are to support preventive health services, education, outreach and referral services, and cannot be used to provide direct financial assistance to individuals. The deadline for submission of applications is December 15, 2000, no later than 4:45 p.m. Applications received after the deadline will not be accepted.
Applications are to be delivered on or before the deadline to:

Ibrahim Bullo
DOH\PHSA
825 North Capitol Street NE, THIRD FLOOR

Room 3141
Washington, DC 20002

A.2 Eligibility Criteria

Program which addresses the priority areas, identified as part of the health promotion and disease prevention efforts in the District of Columbia.

A.3 Type and Amount of Grant

Based on the availability of federal funds, Sub-Grants will be awarded to support prevention services as delineated in Section C-4. Health service awards will be made to organizations whose proposals are designed to provide services in one or more health priority areas. Awards are expected to be made in various amounts. The previous year's average award was thirty-six thousand dollars (\$36,000); the lowest award was twenty thousand dollars (\$20,000); and the highest award was one hundred and ten thousand dollars (\$110,000).

A.4 Term of Grant

The grant agreement will be for a period of 12 months from the date of an award, with the option to renew for an additional year. All awards will be made based on the availability of funds.

A.5 Contact Person

For additional technical information in completing your application package, or for questions regarding procedures, you may contact the following person:

Ibrahim Bullo
Department of Health
Primary Care Planning and Prevention
Preventive Health Services Administration
825 North Capital Street, NE
Room 3141
Washington, D.C. 20002
(202) 442-9142
E-mail: ibullo@dchealth.com

A.6 Explanations to Prospective Grantee

Any prospective grantee desiring an explanation or interpretation of this announcement must request it in writing in time to reach the contact person at least seven days before the application deadline, at the address listed in Section A.5 above. Any information given to

a prospective grantee will be furnished promptly to all other known prospective grantees, if that information is necessary in submitting applications, or if the lack of it would be prejudicial to any other prospective grantee. Oral explanations or instructions given before the award will not be binding.

A.7 Selection of Grantees

Grant applications will be evaluated by a review panel appointed by the DC Department of Health. The review panel will rate and rank only those applications that are responsive to the requirements of the Request for Application (RFA) solicitation package. **Several awards are expected to be made under this grant. Service providers are to submit separate proposals with specific services, objectives, work plans, and budgets, etc. for each health priority area.**

A.8 Review Criteria

Each proposal will be reviewed and evaluated separately by the reviewers. Assessments will be based on the extent to which the following criteria have been addressed:

	Point Value
<u>Criterion A - The Theoretical and Technical Soundness Of the Proposed Plan of Operation.</u>	<u>50</u>
(1) The objectives of the proposed project are clearly Defined, measurable and time specific.	10
(2) The proposed activities and work plan will result in the accomplishment of project objectives.	10
(3) The proposed project would contribute to the achievement of the established objectives in the designated health priority areas.	10
- soundness of methodology/approach	
(4) Provisions are made for adequate evaluation of the effectiveness of the project and for determining the extent to which objectives are accomplished.	10
(5) The proposed impact of the program on the target population(s) is clearly delineated and justified.	10

- The extent to which the proposed project
Will meet specific needs of the target
population(s).

**Criterion B – Recent Relevant Experience and Capabilities
Of the Applicant.** **35**

- | | | |
|-----|--|----|
| (1) | Knowledge and experience relevant to the service applied for and in serving the target population. | 10 |
| | <ul style="list-style-type: none"> - Applicant demonstrates competence in the provision of the services for which funding is requested. - Applicant has relevant experience with the population and geographic area to be served. | |
| (2) | Cultural sensitivity and appropriateness (racial, Ethnic, economic, gender, disability, sexual orientation, etc.) are demonstrated. | 10 |
| (3) | The application demonstrates how the proposed program is consistent with the applicant's organizational mission and history. | 5 |
| (4) | Capacity to administer the proposed program is demonstrated. | 10 |
| | <ul style="list-style-type: none"> - The applicant meets all applicable licensure, certification and accreditation requirements for staff and facilities. - Proposed facilities, staffing, supervision, Management and quality control mechanisms will Promote effective and efficient service delivery. | |

Criterion C - Sound Fiscal Management and Reasonable Budget. **10**

- | | | |
|-----|--|---|
| (1) | The applicant provides evidence of financial stability and documentation of the availability of resources other than grant funds to support the project. | 5 |
| (2) | The applicant demonstrates that the proposed | 5 |

budget is realistic and with project objectives.

Criterion D - Overall Feasibility of the Project

5

Applicant provides documentation that the proposed program will be fully supported by management and the governing body of the applicant (parent organization, if applicable), and that the project is compatible with the mission of the organization and will be effectively coordinated and integrated with its other activities.

5

SECTION B: APPLICATION PREPARATION AND SUBMISSION

B.1 Application Identifications

An original **unbound** application and four (4) copies shall be submitted, each in a separate sealed envelope conspicuously marked: "Application in Response to the Preventive Health and Health Services Block Grant Application for FY 2001." **Each envelope shall be clearly marked to indicate the name of the applicant organization. Applications that are not submitted in sealed envelopes and so marked will not be accepted.**

B.2 Hand Delivery of Applications

Applications must be hand delivered to the office listed below, as specified in section B.3.1.

**Department of Health
Preventive Health Services Administration
825 North Capitol Street, NE
Third Floor, Room 3141
Washington, DC 20002
Attention: Ibrahim Bullo**

B.3 Application Submission Date and Time

B.3.1 Applications must be submitted to the above location by 4:45 p.m., December 15, 2000. All applications will be date/time stamped upon receipt. Late applications will not be accepted.

B.4 Application Form

All applications must be typewritten in English, double-spaced, using standard size black type that does not exceed 12 characters per inch, and submitted unbound on single-sided 8.5" by 11" bond paper. Do not use photo reduction. Telephonic and telegraphic submissions will not be accepted. All pages must be numbered consecutively.

B.5 Application Organization

The applications shall be organized with the following parts in the following order:

Part 1: Detailed Application (Maximum of 6 pages).

Part 2: Organization, Experience and Qualification of Applicant Information (Maximum of 4 Pages).

Part 3: Proposed Itemized Budget(s) and Budget Narrative.

Part 4: Certifications and Affidavits.

A one-page abstract briefly describing the proposed service(s) to be funded must accompany the application. Detailed information about the requirements of each above-reference Part is set forth below. Applicants are also required to complete and sign the attached in the proposal submitted (See Checklist form directly behind the cover page of this document).

B.6 Part 1 - Detailed Application Description

B.6.1 The project description must include the following:

- Health priority area to be served;
- specific measurable program objectives;
- specific service(s) to be provided;
- service methodology/approach;
- the number of non-duplicated clients to be served along with measurement criteria;
- the need for and proposed impact of the project;
- the cultural relevancy and appropriateness;
- the extent to which continuity of preventive health services will be enhanced; and,
- quality assurance mechanisms.

The application must include the program description, a time-specific work plan delineating activities needed to achieve the service objectives, and an itemized budget with budget narrative justifications for which funding is being requested. The time-specific work plan must be included in an appendix. An evaluation plan must also be

provided. The evaluation component should be included in the appendix and referenced in the program description for each service.

B.6.2 Agencies and non-profit organizations may also submit **separate applications** to provide sexual assault prevention and risk reduction services to children and adults residing in the District of Columbia. To reduce health disparities, the applicants may address providing services to specific priority populations such as the Hispanic community and low-income African American youth and adults. Basic services should address the following:

1. Providing culturally appropriate sexual violence prevention and risk reduction presentations to low-income minority youth in middle, junior and high schools in Spanish and English.
2. Conducting professional workshops for teachers, school nurses and health professionals in identifying sexual assault victims, legal reporting requirements of sexual assault, and basic counseling techniques.
3. Conducting in Spanish and English, community-based outreach and educational efforts throughout the year at health fairs, churches, schools, non-profit clinics and other appropriate sites in the District of Columbia.
4. Developing evaluation tools to monitor the effectiveness of the services provided.

B.7 Part 2 - Organization, Experience and Qualifications of Applicant

B.7.1 Each applicant must provide the following information in this section:

- a. Name, title, address and current telephone number of applicant's contact person.
- b. Documentation that key management and program staff meets licensure and/or certification requirements of the District of Columbia Government.
- c. Articles of incorporation, partnership or joint venture agreement, if applicable.
- d. Copy of operating policies and procedures and patient handbook or statement of rights and responsibilities, where applicable.
- e. A copy of any specific license or certification required to perform the services in this grant and for the facilities proposed to be used to fulfill the requirements of the grant, including but not limited to, an appropriate certificate of occupancy.

- f. Documentation that key management and program staff meet licensure and/or certification requirements of the District of Columbia Government.
 - g. Information indicating whether applicants is a corporation, joint venture, partnership (including type of partnership), or individual.
 - h. Articles of incorporation, partnership or joint venture agreement, if a applicable.
 - i. If a nonprofit organization, proof of current registration and status.
 - j. Copy of any current license, registration or certification to transact business in the District of Columbia.
 - k. Copy of operating policies and procedures and patient handbook or statement of rights and responsibilities, where applicable.
- B.7.2. The Applicant shall be required to maintain an accounting system in accordance with generally accepted accounting principles. Such records shall be made available to DOH, upon request.
- B.7.3. The application shall include information regarding the applicant's organizational structure and financial status including:
- a. Current certified statement of the applicant's financial condition, i.e. not more than twelve months old and prepared by an independent CPA, who is not an employee of the applicant.
 - b. The name of the chief executive officer and other key managers, by title, who will have major policy and decision-making responsibilities for this grant, if awarded.
 - c. Such data as the District may request with respect to the Applicants operations, and other information as may be needed by the jurisdiction to make a determination as to the applicant's responsibilities and capabilities.
 - d. The District reserves the right to request additional information regarding the Applicant's organizational status and to require the Applicants to obtain an appropriate license, registration or certification to transact business in the District if such license, registration or certification is required by law.

B.8 Part 3 - Applicant's Staff and Subcontractor Information

- B.8.1 Applications must list the names and title of top management, line supervisory and key professional personnel who will be assigned to the proposed project and

state the percentage of time each will devote to the project in total for each distinct service for which funding is being requested.

Applications must contain resumes for all management and key professional personnel, including:

- Full name
- Title and area of specialty
- Experience directly related to the proposed project. If the individual worked on any related Federal or D.C. Government grants or contracts, number should reference them.

The Applicant shall document that each of these management and key personnel possess adequate education, training and experience to perform the duties to which they are assigned. Staff persons must meet all applicable requirements for certification and/or licensing, and shall be adequately trained to perform required duties.

B.8.2 Applications must include complete job descriptions covering all salaried positions within the project. Job descriptions shall identify education, experience and/or certification requirements and include a description of duties and responsibilities, hours of work, salary range, and performance evaluation criteria. Job descriptions must be specific to the position to be funded.

B.8.3. Applications must describe the manner in which the proposed staff and any subcontractors will be managed and what the reporting relationships will be. The mane of each proposed staff member or subcontractor staff and the percentage of time that each will devote to the project shall be depicted.

B.9 Part 4 - Proposed Budget

Applicants must provide an itemized budget for the expenditure of funds. The budget must clearly state all cost and price information on activities required to implement the project. Budget requests must be itemized with an accompanying brief narrative justification for each major budget item. The budget justification must also reflect any in-kind and non-grant resources supporting the proposed service(s). **All funds are to support preventive health priority areas.**

Applicant's budget must identify the total number of staff persons required and the specific time allocation for each staff member working to provide the service(s). Any proposed agreements with subcontractors must also be clearly identified in the budget.

B.10 Part 5 - Certifications and Affidavits

All applicants seeking funding shall complete and return the certifications with their applications, as required by the District of Columbia.

B.11 Retention of Applications

All applications will be retained by the Department of Health and will not be returned to the applicants.

B.12 Certification Regarding a Drug-Free Workplace

B.12.1 Definitions (As used in this provision):

- "Controlled substance" means a controlled substance in schedules I through V of section 202 of the Controlled Substances Act (21 U.S.C. 812) and as further defined in regulation at 21 CFR 308.11-1308.15.
- "Conviction" means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the federal or state criminal drug statutes.
- "Criminal drug statute" means a federal or non-federal criminal statute involving the manufacture, distribution, dispensing, possession or use of any controlled substance.
- "Drug-free workplace" means the site(s) for the performance of work done in connection with a specific contract. Employees of the Grantee are prohibited from engaging in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance at a drug-free workplace.
- "Employee" means an employee of a Grantee directly engaged in the performance of work under a government grantee agreement.
- "Directly Engaged" is defined to include all direct cost employees and any other grantee employee who has other than a minimal impact or involvement in contract performance.
- "Individual" means an offeror/grantee that has no more than one employee including the offeror/grantee.

B.12.2 By submission of its application the applicant, if other than an individual, seeking a grant that equals or exceeds \$25,000, certifies and agrees to do the following as to all persons employed under any grant award:

-- No later than 30 calendar days after grant award (unless a longer period

is agreed to in writing), for a grant of 30 calendar days or more performance duration; or as soon as possible for grants of less than 30 calendar days performance duration, but in any case, by a date prior to when performance is expected to be completed--

- a. Publish a statement notifying such employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the Grantee's workplace and specifying the actions that will be taken against employees for violations of such prohibition.
- b. Establish a drug-free awareness program to inform such employees about:
 - (1) The dangers of drug abuse in the work- place.
 - (2) The grantee's policy of maintaining a drug-free workplace.
 - (3) Any available drug counseling, rehabilitation and employee assistance programs.
 - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.
- c. Provide all employees engaged in performance of the contract with a copy of the statement required by subparagraph (2)(a) of this provision.
- d. Notify such employees in the statement required by subparagraph (2)(a) of this provision that, as a condition of continued employment on the grant resulting from this solicitation, the employee will:
 - (1) Abide by the terms of the statement.
 - (2) Notify the employer of any criminal drug statute conviction for a violation occurring in the work place no later than five (5) calendar days after such conviction.
- e. Notify the Grant Administrator in writing within ten (10) days after receiving notice under sub-division (2)(d)(ii) of this provision, from an employee or otherwise receiving actual notice of such conviction. The notice shall include the position and title of the employee.
- f. Within 30 calendar days after receiving notice under subdivision

(d)(ii) of this provision of a conviction, take one of the following actions with respect to any employee who is convicted of a drug abuse violation occurring in the workplace:

- (1) Take appropriate personnel action against such employee, up to and including termination; or
- (2) Require such employee to satisfactorily participate in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health law enforcement, or other appropriate agency.

g. Make a good faith effort to maintain a drug-free workplace through implementation of subparagraphs (a) through (f) of this provision.

B.12.3 By submission of its application the applicant, if an individual who is making an offer of any dollar value certifies and agrees that the applicant will not engage in the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance in the performance of the grant resulting from this solicitation.

B.12.4 Failure of the applicant to provide the certification required by paragraphs B.12.2 or B.12.3 of this provision renders the applicant unqualified and ineligible for award.

B.12.5 In addition to other remedies available to the Government, the certification in paragraphs B.12.2 and B.12.3 of this provision concerns a matter within the jurisdiction of an agency of the United States and the making of a false, fictitious, or fraudulent certification may render the maker subject to prosecution under Title 18, United States Code, Section 1001.

SECTION C: SCOPE OF SERVICES

PART I TARGETED POPULATIONS

C.1 General Purpose

The Grantee shall provide surveillance, service delivery or public/professional education to District of Columbia residents.

C.2 Target Population

The target populations for this grant shall be all or part of the 606,900 residents of the District of Columbia, as enumerated by the 1990 Census, of which 46.6 percent are males and 53.4 percent are females.

C.3 Location of Services

The Grantee shall provide prevention services under this RFA in Washington, D.C. As appropriate, services will either be provided in appropriate facilities in Washington, D.C., accessible to public transportation and to persons with mobility limitations or, in the case of outreach services, throughout the Washington, D.C. community, appropriate to reach the target population(s).

C.4 Specific Services

1. The Grantee shall develop, and provide to PHSA within 15 days of grant award, a detailed work plan for service. The Grantee shall provide a description of the methods to be utilized for surveillance, public/professional education and/or service delivery to the target population(s).
2. At a minimum, the Grantee shall provide one of the three initiatives listed below:

- (a) Surveillance

Grantee shall establish/maintain mechanisms designed to enhance health-related surveillance systems to facilitate program planning or evaluation. Surveillance is defined as the ongoing systematic collection, analysis and interpretation of health data that is essential to planning, implementing and evaluating public health practice, integrated with timely dissemination of the data. A surveillance system would:

- (1) identify segments of the population at higher risk for disease and the failure to access preventive health care;
 - (2) identify factors contributing to the disease burden, such as behavior risk factors and limited or inequitable access to preventive or early detection services;
 - (3) collect, analyze stateside population-based information on demographics, incidence, and mortality from preventable disease;
 - (4) measure the impact or outcome of intervention strategies on reducing morbidity or mortality to determine the effectiveness of program activities.

- (b) Public/professional education

The Grantee shall provide education, raise awareness and/or motivate behavior change regarding preventive health and health services through: public education/outreach; professional education; and/or collaboration/partnerships.

Educational and collaborative efforts shall include assessment of intended audience and resources; development and implementation of strategy objectives that are specific, measurable, attainable, realistic and within a time frame; and evaluation of these defined objectives.

Public education/outreach programs shall create awareness of preventive health and health services and motivate the intended population to modify or change health behavior. Activities include, but are not limited to, presentations to community groups and work sites; contact with broad-based media; organization of workshops, training, and conferences; and participation in health fairs.

Professional education programs shall train health care professionals in knowledge, attitudes, and skills in order to enable professionals to perform their jobs competently. Professional education includes promoting the development and implementation of systems of health care delivery that provide positive clinical outcomes for clients as well as the development and dissemination of clear guidelines and recommendations.

(c) Service Delivery

The Grantee can provide screening services as a preventive health measure. The purpose will be the early detection of chronic diseases with priority given to residents who are low-income, uninsured, under insured, and/or racial and ethnic minorities. Screening services should incorporate:

- (1) identifying and referring residents in need of preventive health services, including maintaining information on the availability of local resources; and
- (2) developing mechanisms to assist residents in scheduling services

3. Services will be provided by means of culturally appropriate and acceptable modalities.
4. When possible, the Grantee shall coordinate services with other community-based programs that support similar and related programs.

5. The Grantee shall meet with the PHSA, whenever requested, to share information and technical assistance related to education, services, and literature.
6. The Grantee shall be responsible for documenting and describing program successes, unmet needs, barriers and problems encountered.
7. The Grantee shall be responsible for documenting and describing program success, Unmet needs, barriers and problems encountered.

C.5 Staff Requirements

1. The Grantee must provide a complete written job description covering all positions funded through the grant, which must be included in the project files and be available for inspection on request. The job description shall include education, experience, and/or licensing/certification criteria, a description of duties and responsibilities, hours of work, salary range and performance evaluation criteria. When hiring staff for this grant project, the Grantee shall obtain written documentation of work experience and personal references.
2. The Grantee shall maintain an individual personnel file for each project staff member which will contain the application for employment, professional and personal references, applicable credentials/certifications, records of required medical examinations, personnel actions including time records, documentation of all training received, notation of any allegations of professional or other misconduct, and Grantee's action with respect to the allegations, and date and reason if terminated from employment. All of these personnel materials shall be made available to the Grant Administrator upon request.
3. The Grantee shall maintain an individual personnel file for each project staff member which will contain the application for employment, professional and personal references, applicable credentials/certifications, records of required medical examinations, personnel actions including time records, documentation of all training received, notation of any allegations of professional or other misconduct, and Grantee's action with respect to the allegations, and date and reason if terminated from employment. All of these personnel materials shall be made available to the Grant Administrator upon request.
4. The Grantee shall provide orientation sessions for each staff member with respect to administrative procedures, program goals, and policies and practices to be adhered to under the Grant Agreement.
5. The Grantee shall maintain a current organizational chart, which displays organizational relationships and demonstrates who has responsibility for administrative oversight and clinical supervision over each priority service activity.

6. Any changes in staffing patterns or job descriptions shall be approved in writing in advance by the DOR Grants Officer.

C.6 Facility Requirements

1. Regulations

The Grantee's facilities used during the performance of this agreement shall meet all applicable Federal, state, and local regulations for their intended use throughout the duration of the Grantee Agreement. The Grantee shall maintain current all required permits and licenses for the facilities. The Grantee's failure to do so shall constitute a failure to perform under the agreement and be a basis for termination of the agreement for default.

2. Emergency Back-Up Site

The Grantee shall assure that an emergency site facility has been identified should the primary facility become unavailable for use as a result of a catastrophic event.

3. Disabled Access

Facilities offered for the provision of services under the Grantee Agreement shall be accessible to persons with mobility and other limitations (e.g., blind, deaf and hearing-impaired persons), consistent with the Rehabilitation of the Handicapped Act, P.L. 95-602 (Section 504), and the Americans with Disabilities Act, P.L. 101-336, as appropriate, which shall be incorporated in the Grant Agreement.

4. Maintenance

All supplies and services routinely needed for maintenance and operation of the facility, such as security, janitorial services, or trash pick-up, shall be provided by the Grantee.

C.7 Performance Standards and Quality Assurance

1. The Grantee shall monitor and evaluate the delivery of all services. At a minimum, the quality assurance program shall include a review of the appropriateness, quality and timeliness of each service.
2. The Grantee shall develop and implement policies and procedures to evaluate the accuracy of data collection and reporting activities in accordance with protocols established by the Department of Health, Preventive Health Services Administration.

3. The Grantee shall participate in the evaluation of the project by appropriate internal staff and/or external evaluators with the assurance that client confidentiality will be maintained. These activities may include, but are not limited to, site visits, client surveys, or other data collection activities.

C.8 Reports

1. The Grantee will submit a quarterly report to the Grant Administrator by the 10th business day after the end of each quarter of service regarding the progress toward completion of task requirements in the scopes of service. Such reports must contain the following information in a format approved by the Grant Administrator:
 - (a) draft copies of all educational and any other materials for use in implementing this grant, for approval by the Preventive Health Services Administration prior to preparation in final form and dissemination;
 - (b) program description including the targeted population with the total number and names of organizations and individuals invited to participate (and who have participated) in workshops, seminars, and/or courses, divided by the section of the District where they are located;
 - (c) demographics of the population served;
 - (d) listing of the dates and location of all preventive health educational and outreach activities conducted during the reporting month;
 - (e) collaboration (if any) with other organizations serving the target population; and
 - (f) status of work plan, indicating the extent to which established milestones for the reporting months have been accomplished, and identifying proposed revisions to the work plan to address problem areas.
 - (g) any other reporting requirements specific to the substance and content of the Grant.

Also, included in the report should be a summary of the results of the evaluation of services under the quality assurance program.

2. All payment requests shall be accompanied by a copy of the quarterly report covering the period for which reimbursement is being requested. Payment

requests shall be based on invoices with supporting source documentation as may be required by the Preventive Health Services Administration.

3. The Grantee shall submit to the Grant Administrator at the Preventive Health Services Administration a final report no later than the 30th day after expiration of the Grant Agreement, summarizing all service delivery data, accomplishments, issues and recommendations.
4. The Grantee shall report unusual incidents by the facsimile or telephone to the Grant Administrator within 24 hours of the event, and in writing within five (5) days after occurrence. An unusual incident is an event which affects staff (Administrative Agency's employees or Grantee's staff) or clients, which is significantly different from the regular routine or established procedures. Examples include, but are not limited to, unusual death; injury; unexplained absence of a client from a residence or program; physical, sexual, or verbal abuse of a client by staff or other clients; staff negligence, fire, theft, destruction of property, or sudden serious problems in the physical plant; complaints from families or visitors of clients; requests for information from the press, attorneys, or government officials outside DOH, who are involved with the grant; and client behavior requiring attention of staff not usually involved in their care.

C.9 Records

1. The Grantee must keep accurate records of activities of the project. When delivering services, the Grantee must maintain records reflecting initial and periodic assessments, if appropriate; initial and periodic service plans; and the ongoing progress of program activities.
2. The Grantee shall provide the Grant Administrator, and other authorized representatives of the Department of Health and the District Government, such access to project and financial records as may be necessary for monitoring purposes. To ensure confidentiality and security, records should be kept in a locked file controlled by appropriate Grantee staff.
3. The Grantee shall retain records for at least three (3) years following closeout of the Grant.

C. 10 Monitoring

1. The Preventive Health Services Administration shall monitor and evaluate the performance of the Grantee according to the scope of work and related service delivery standards set forth in the Grantee Agreement. The Grant Administrator or his/her designee will make periodic scheduled and unscheduled site visits to monitor the implementation of the scope of work and terms and conditions.

2. The Grantee shall provide the Grant Administrator and other authorized representatives of the District, such access to its facilities, records, clients and staff as may be necessary for monitoring purposes.
3. The Department of Health shall assign a staff person to monitor the project. The Grant Monitor shall review all written policies and procedures applicable to the project, review all monthly reports, conduct site inspections, and hold periodic conferences with the Grantee to assess the Grantee's performance in meeting the requirements of the Grant Agreement.

C.11 Evaluation

The Grant Administrator shall be authorized to assess the Grantee's performance with respect to accomplishing the purposes of the Grant Agreement. Specifically, the Grantee's performance shall be assessed to determine the quality of the services delivered and the Grantee's ability to deliver services according to the deadlines established in the agreement.

SECTION D: GRANT TERMS AND CONDITIONS

Any grant awarded under this program shall be subject to the following terms and conditions:

D.1 Payment Provisions

The District shall make payments on invoiced amounts in accordance with the terms of the Grant Agreement which results from the RFA.

D.2 Audits

1. The Grantee shall obtain an audit in accordance with OMB Circular A- 133, Audits for Non-Profit Organizations. This is an allowable cost and must be included in the application budget. (See Attachments)
2. At any time or times before final payment and three (3) years thereafter, the Administrative Agency may have the Grantee's expenditure statements audited. In the District of Columbia, disallowances and repayments shall be subject to the provisions of the DOH Grant Regulations.

D.3 Insurance

The following clauses are required in Grant Agreements, but may be omitted for grants to individuals or for very small grants to organizations when the DOH Grants Officer

determines that the risk of liability is minimal.

1. The Grantee at its expense shall obtain the minimum insurance coverage set forth below prior to award of the grant and keep such insurance in force throughout the grant period.
2. The Grantee shall carry employers' liability coverage of at least One Hundred Thousand Dollars (\$100,000).
3. The Grantee shall carry bodily injury liability insurance coverage written on the comprehensive form of policy of at least Five Hundred Thousand Dollars (\$500,000) per occurrence.
4. The Grantee shall carry automobile liability insurance written on the comprehensive form of policy. The policy shall provide for bodily injury and property damage liability covering the operation of all automobiles used in connection with performing the grant. Policies covering automobiles shall provide coverage of at least Two Hundred Thousand Dollars (\$200,000) per person and Five Hundred Thousand Dollars (\$500,000) per occurrence for bodily injury and Twenty Thousand Dollars (\$20,000) per occurrence for property damage.
5. The Grantee shall carry workers' compensation insurance covering all of its employees employed upon the premises where the grant services are performed and in connection with its other operations pertaining to the grant agreement, and shall comply at all times with the provisions of the workers' compensation laws of the District or other eligible jurisdiction, as applicable, if the grant work is performed outside the District of Columbia.
6. All insurance provided by the Grantee as required by this section, except comprehensive automobile liability and workman's compensation insurance, shall set forth the District as an additional insured. All insurance shall be written with companies licensed by the District (if services are to be funded through the District government) with a duplicate copy to be sent to the District within 30 days of the grant award. The policies of insurance shall provide for at least thirty (30) days written notice to the District prior to their termination or material alteration.

D.4 Rights in Data

1. The Department of Health retains ownership of all data produced under this Grant. The Grantee may not publish scientific or technical articles based on this data and/or information without prior approval and written consent of the Grant Administrator. The Department of Health shall not unreasonably withhold consent to the Grantee's request(s) to publish or

reproduce data in professional and scientific publications.

2. In the event any research activity is conducted under this Grant Agreement, the Grantee must have the prior approval and written consent of the Grant Administrator. Any such research which involves the use of human subjects for research shall be governed by applicable U.S. Department of Health and Human Services policies and federal regulations. The Grantee agrees to review any research activities involving human subjects by a designated Institutional Review Board (IRB) and to continue annual monitoring to assure compliance with requirements for the protection of human subjects. At such time, a copy of the HHS Form 596, "Protection of Human Subjects Assurance, Certification, Declaration," must be signed and submitted to the Grant Administrator.

D.5 Compliance with Tax Obligations

Prior to execution of a grant agreement a recipient must be in compliance with tax requirements in the District or other eligible jurisdiction and with federal tax laws and regulations. Nonprofit organizations must register annually to meet tax exemption requirements and must provide a Certificate of Good Standing prior to execution of the Grant Agreement.

ATTACHMENTS

Appendix A:

- A. 1 Grantee Identification Information
- A.2 Department of Finance and Revenue (DFR) Tax Certification

Appendix B:

- B DHS Grant Regulations

Appendix C:

- C OMBCircularA-133
Audits of Institutions of Higher Learning and Other Non Profit Institutions